


Non-pharmacological interventions in adolescents with ASD

Najmeh Tavakolian

Child And Adolescent Psychiatrist- Tehran University of Medical Sciences

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- ▶ Many children get an autism diagnosis in later childhood or adolescence.
 - ▶ Many therapies and supports can help older children, including some specifically designed for this age group.
 - ▶ Therapies and supports for older children include cartooning, CBT, modelling, peer training, self-management training, social skills training and more.

Behavioral Approaches

- ▶ Behavioral approaches focus on changing behaviors by understanding what happens before and after the behavior. Behavioral approaches have the most evidence for treating symptoms of ASD. They have become widely accepted among educators and healthcare professionals and are used in many schools and treatment clinics.
- ▶ A notable behavioral treatment for people with ASD is called **Applied Behavior Analysis (ABA)**. ABA encourages desired behaviors and discourages undesired behaviors to improve a variety of skills. Progress is tracked and measured.

- ▶ Two ABA teaching styles are Discrete Trial Training (DTT) and Pivotal Response Training (PRT).

DTT uses step-by-step instructions to teach a desired behavior or response. Lessons are broken down into their simplest parts, and desired answers and behaviors are rewarded. Undesired answers and behaviors are ignored.


PRT takes place in a natural setting rather than clinic setting. The goal of PRT is to improve a few “pivotal skills” that will help the person learn many other skills. One example of a pivotal skill is to initiate communication with others.

Behavior analysis helps us to understand:

- ▶ How behavior works/ How behavior is affected by the environment/ How learning takes place

ABA therapy programs can help:

- ▶ Increase language and communication skills
- ▶ Improve attention, focus, social skills, memory, and academics
- ▶ Decrease problem behaviors

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- ▶ Good ABA programs for autism are not "one size fits all." ABA should not be viewed as a canned set of drills. Rather, each program is written to meet the needs of the individual learner.
 - ▶ The goal of any ABA program is to help each person work on skills that will help them become more independent and successful in the short term as well as in the future.
 - ▶ Treatment goals are written based on the age and ability level of the person with ASD. Goals can include many different skill areas, such as:
Communication and language/ Social skills/ Self-care (such as showering and toileting)/ Play and leisure/ Motor skills/ Learning and academic skills.
 - ▶ ABA is effective for people of all ages. It can be used from early childhood through adulthood!

Developmental Approaches

- ▶ Developmental approaches focus on improving specific developmental skills, such as language skills or physical skills, or a broader range of interconnected developmental abilities. Developmental approaches are often combined with behavioral approaches.
- ▶ The most common developmental therapy for people with ASD is Speech and Language Therapy.
- ▶ Occupational Therapy teaches skills that help the person live as independently as possible. Skills may include dressing, eating, bathing, and relating to people. Occupational therapy can also include:
 - Sensory Integration Therapy to help improve responses to sensory input that may be restrictive or overwhelming.
 - Physical Therapy can help improve physical skills, such as fine movements of the fingers or larger movements of the trunk and body.

Educational Approaches



- ▶ Educational treatments are given in a classroom setting. One type of educational approach is the **Treatment and Education of Autistic and Related Communication-Handicapped Children (TEACCH) approach**.
- ▶ TEACCH is based on the idea that people with autism thrive on consistency and visual learning. It provides teachers with ways to adjust the classroom structure and improve academic and other outcomes.
- ▶ For example, daily routines can be written or drawn and placed in clear sight. Boundaries can be set around learning stations. Verbal instructions can be complimented with visual instructions or physical demonstrations.

Social-Relational Approaches

- ▶ Social-relational treatments focus on improving social skills and building emotional bonds. Some social-relational approaches involve parents or peer mentors.
- ▶ The Developmental, Individual Differences, Relationship-Based model encourages parents and therapists to follow the interests of the individual to expand opportunities for communication.
- ▶ **The Relationship Development Intervention (RDI) model** involves activities that increase motivation, interest, and abilities to participate in shared social interactions.
- ▶ **Social Stories** provide simple descriptions of what to expect in a social situation.
- ▶ Social Skills Groups provide opportunities for people with ASD to practice social skills in a structured environment.

- ▶ About therapies and supports for older autistic children and teenagers
- ▶ Cartooning strategies
- ▶ Cognitive behaviour therapy (CBT)
- ▶ Modelling
- ▶ Peer training
- ▶ Self-management techniques
- ▶ Social skills training



Therapies and supports for older autistic children and teenagers

- ▶ Therapies and supports can help children develop skills and understanding for:
 - ▶ Going through puberty
 - ▶ Building healthy self-esteem and social relationships
 - ▶ Managing romantic relationships and sexual feelings
 - ▶ Dealing with adolescent low moods
- ▶ The therapies and supports are chosen will depend on what's right for children. Ideally, professionals will help parents find an approach that makes the most of their children's strengths and the way they naturally do things. This can help their children learn, develop and thrive.

Cartooning strategies

- ▶ Cartooning or comic strip strategies use visual symbols to help autistic children and teenagers understand social situations. By drawing cartoons, children can turn abstract or confusing events into pictures that they can understand and think about with an adult's help.
- ▶ For example, a child is sent to the principal's office after a playground conflict. With an adult's help, the child could draw the situation as a cartoon, using speech bubbles. An adult could then talk about what happened with child and help them understand the thoughts and feelings of the other people involved.

Cognitive behaviour therapy (CBT)

- ▶ CBT is based on the idea that how we think, how we feel and how we act are all related. That is, the way we think about something shapes our feelings and our behaviour.
- ▶ CBT could teach child to replace this negative thinking with something more positive and realistic. This could be, 'It's hard to make friends but I'm a good person and I'm going to keep trying'. This will help child feel better about themselves, so they're more likely to try to socialise with peers.
- ▶ CBT programs also often teach relaxation strategies that children can use to reduce and manage anxiety associated with autism.
- ▶ CBT is a 'talking therapy', which means child needs an adequate understanding of language to use it.

Modelling



- ▶ Modelling involves an adult or peer showing a child how to do something or how to behave, which the child then copies. Modelling can help children and young people learn many skills – for example, social skills like smiling and saying hello, skills for self-care and hygiene, and educational tasks.
- ▶ Video-modelling is another option. There are some ready-made videos that show people modelling skills, but you could also make your own. For example, you could record yourself, your child, or someone else joining in conversations, inviting a peer to play, using body language, using different tones of voice and so on.

Peer training



- ▶ Peer training teaches typically developing children – for example, siblings or classmates – strategies for playing and interacting with children who have trouble with social skills. When these typically developing children play or socialise with autistic child, the child has more and better opportunities to develop social skills.
- ▶ For example, classmates might learn to appreciate that people have diverse strengths and interests. They might also learn how to start and maintain interactions with autistic children.

Self-management techniques



- ▶ Autistic children can develop independence by learning to manage their own behaviour.
- ▶ One way they can do this is by recording how often a particular behaviour happens using tick sheets, stickers or a wrist counter.
- ▶ For example, a child's goal might be to stay sitting down until they've finished eating. Each time the child achieves this goal, they put a sticker in a book.

Social skills training

- ▶ Social skills training helps children and teenagers learn to read non-verbal cues like eye contact, body language, tone of voice and facial expression. It often covers skills like seeing things from other people's perspectives, solving social problems and understanding social and emotional rules.
- ▶ A child might be able to do a social skills training program one on one with a therapist or teacher, or as part of a group. Some training programs include outings so child can try out new skills in the community. This helps children apply the skills they've learned in one setting to other settings, situations and people.
- ▶ Some social skills training programs are designed by a therapist or a teacher for a specific child or group of children. Others might be run by someone who's trained to use a particular program. These include **the Westmead Feelings Program, the Social Thinking Program, Stop Think Do or the Program for the Education and Enrichment of Relational Skills (PEERS)**.

Westmead Feelings Program



- ▶ An emotion-regulation program to increase the capacity of children on the autism spectrum
- ▶ A pair of 15-month intervention programs teaching autistic children about emotional understanding and social awareness, in close collaboration with parents, teachers and facilitators. Available for two different ability levels.
- ▶ Not just clinic-based, the Westmead Feelings Program develops parents' and teachers' emotion coaching skills, supporting children to understand emotions, solve problems and ultimately manage their feelings in everyday settings.

Module 1: Understanding emotions

- ▶ Module 1 for children
- ▶ Facilitator introduces children to four primary emotions – happy, sad, worried and angry – and explains that there are different intensities of feelings. Children learn this concept with the help of the Feelings Strength Bar.
- ▶ How to use the Feelings Strength Bar to rate intensities of feelings
- ▶ How to recognise happy, sad, worried and angry facial features
- ▶ How different people can have different feelings in the same situation



Module 1 for parents and teachers:

- ▶ Facilitator works closely with parents and teachers to ensure the best possible outcome for each child.
- ▶ Parents and teachers are introduced to their role as 'emotion coaches', and learn about how to support children to talk about their emotions.

Module 2: Problem solving and perspective taking

Module 2 for children

- ▶ Children learn about feelings in themselves and in others, to foster a greater understanding of the causes of and influences on people's emotional experiences and behaviour. They also learn specifically tailored cognitive-behavioural therapy strategies.
- ▶ How to solve problems, using structured visual tools
- ▶ Reading emotional signs in faces, bodies and voices
- ▶ Perspective taking, or how different people can have different feelings in the same situation

Module 2 for parents and teachers

- ▶ Parents and teachers continue to fine-tune their emotion-coaching skills, and learn about problem solving and perspective taking.

Module 3: Managing emotions

Module 3 for children

- ▶ Children learn a range of strategies for dealing with difficult or unpleasant emotions, to feel more in control and accepting of their emotions, enabling them to react more appropriately and in more socially positive ways.
- ▶ Management of not-so-good feelings
- ▶ How to use the Feelings Control Kit strategies
- ▶ Recap of previously learned skills and strategies



Module 3 for parents and teachers

- ▶ Parents and teachers learn ways by which they can support children's emotion management skills.
- ▶ Troubleshooting skills from Modules 1 and 2
- ▶ How to use the Feelings Control Kit strategies
- ▶ Effective use and promotion of emotion regulation skills

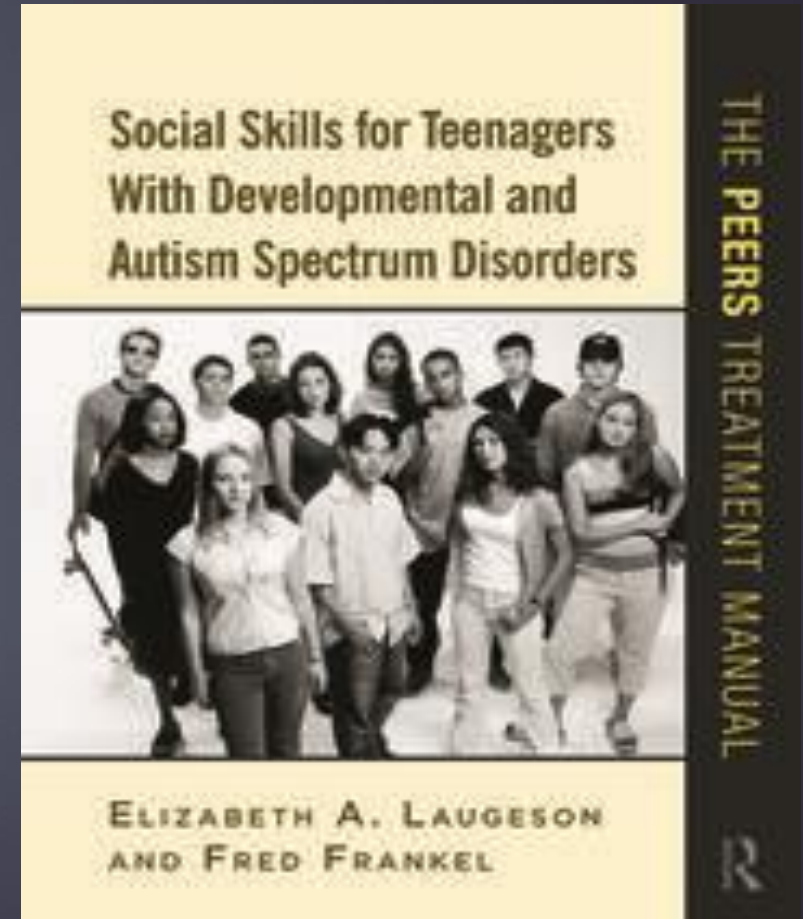
Booster Session

- ▶ The Boosters comprise one session each for children, teachers and parents approximately six months after completion of Module 3.
- ▶ Revision of all Westmead Feelings Program skills
- ▶ Troubleshooting and skill refinement based on parent and teacher feedback



PEERS

- ▶ The Program for the Education and Enrichment of Relational Skills
- ▶ 14 sessions
- ▶ 90 minutes
- ▶ 2 groups



Stop Think Do

- ▶ Stop Think Do aims to take the emotions out of all problem areas (behavioural, learning, social and moods) and redirect the energy into problem solving.
- ▶ Emotions are identified and expressed early at the STOP stage, ensuring the brain has the opportunity to THINK about options to solve the problem, and motivating and skilling the person to DO it.
- ▶ The Stop Think Do Program is internationally acclaimed with proven success.

Social Thinking Program



- ▶ The Social Thinking Methodology provides evidence-based strategies to help people ages four through adult develop their social competencies, flexible thinking & social problem solving and improve:

conversation & social connection, executive functioning, friendship & relationship development, perspective taking, self-regulation, and Social Thinking vocabulary.

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